



PATENT APPLICATION

Attorney File No. A3182-US-NP

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **DROP GENERATING APPARATUS**

the specification and claims of which

are attached hereto OR was filed on 1/10/04 as U.S. Application No. 10/755,243

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code, §119 of any foreign or U.S. Provisional application(s) for patent listed below, and have also identified below any foreign application(s) or Provisional application(s) for patent having a filing date before that of the application on which priority is claimed:

Prior Foreign or U.S. Provisional Application(s)

(Number)

(Country)

(Day/Month/Year Filed)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Mark Costello	Reg. No. 31,342;	Eugene O. Palazzo	Reg. No. 20,881;
Ronald F. Chapuran	Reg. No. 26,402;	Elizabeth F. Harasek	Reg. No. 28,850;
Kevin R. Kepner	Reg. No. 32,145;	Manuel Quiogue	Reg. No. 26,978
Nola Mae McBain	Reg. No. 35,782;		

ADDRESS ALL CORRESPONDENCE TO:
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DIRECT TELEPHONE CALLS TO:
(name and telephone number)
Manuel Quiogue
503-685-4229

CUSTOMER NUMBER: 25453

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

DECLARATION AND POWER OF ATTORNEY, continued

Name of sole or first inventor: Christine M. Greiser

Inventor's Signature:

Residence: 1975 Hillcrest Drive, West Linn, OR 97068

Citizenship: United States of America

Date: 5/6/04

Mailing Address:
(Same as above)

Name of second joint inventor: Ronald F. Burr

Inventor's Signature:

Residence: 2605 Seahaven Court, Richmond, VA 23233

Citizenship: United States of America

Date: _____

Mailing Address:
(Same as above)

Name of third joint inventor: Eric Segerstrom

Inventor's Signature:

Residence: 5100 Shoal Creek Boulevard, Austin, TX 78756

Citizenship: United States of America

Date: 5/4/04

Mailing Address:
(Same as above)

Name of fourth joint inventor: John S. Moore

Inventor's Signature:

Residence: 15087 Nw Oakmont Loop, Beaverton, Or 97006

Citizenship: United States of America

Date: 5/6/04

Mailing Address:
(Same as above)



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DECLARATION AND POWER OF ATTORNEY, continued

Name of sole or first inventor: Christine M. Greiser

Inventor's Signature:

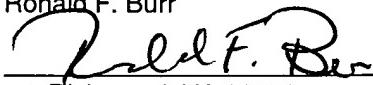
Residence: 1975 Hillcrest Drive, West Linn, OR 97068

Citizenship: United States of America

Date: _____

Mailing Address:
(Same as above)

Name of second joint inventor: Ronald F. Burr



Date: 5/4/04

Inventor's Signature:

Residence: 2605 Seahaven Court, Richmond, VA 23233

Citizenship: United States of America

Mailing Address:
(Same as above)

Name of third joint inventor: Eric Segerstrom

Inventor's Signature:

Residence: 5100 Shoal Creek Boulevard, Austin, TX 78756

Citizenship: United States of America

Date: _____

Mailing Address:
(Same as above)

Name of fourth joint inventor: John S. Moore

Inventor's Signature:

Residence: 15087 Nw Oakmont Loop, Beaverton, Or 97006

Citizenship: United States of America

Date: _____

Mailing Address:
(Same as above)